

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>12/28/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>RSD</i>	<i>688971</i>	<i>3/3/00</i>
FORMALITY REVIEW	<i>NO</i>		<i>52500</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ Canceled
☐ Restricted
☐ Non-elected
☐ Interference
☐ Appeal
☐ Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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